

Fax To 571-273-8300 - 5 PAGES

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL  
FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

Filing Date

First Named Inventor

Art Unit

Examiner Name

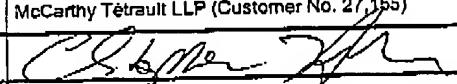
Attorney Docket Number

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FEB 01 2007

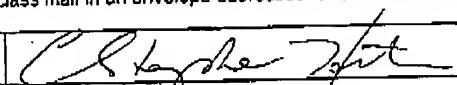
| ENCLOSURES (Check all that apply)  |  |  |
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| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks  |  |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |        |  |
|--------------|---|--------|--|
| Firm Name    | McCarthy Tétrault LLP (Customer No. 27,155)   |        |  |
| Signature    |  |        |  |
| Printed name | Christopher N. Hunter   |        |  |
| Date         | Reg. No.  | 52,528 |  |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |   |      |
|-----------------------|---|------|
| Signature             |  |      |
| Typed or printed name | Christopher N. Hunter (Reg. No. 52,528)   | Date |

January 30, 2007

Feb. 1

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (01-06)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2006

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

180.00

Complete if Known

|                      |                            |                    |
|----------------------|----------------------------|--------------------|
| Application Number   | 10/722,474                 | RECEIVED           |
| Filing Date          | November 28, 2003          | CENTRAL FAX CENTER |
| First Named Inventor | JOCH, Anthony              |                    |
| Examiner Name        | DASTOURI, MEHRDAD          | FEB 01 2007        |
| Art Unit             | 2621                       |                    |
| Attorney Docket No.  | 178827-336070 (T1176-8-US) |                    |

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

 Deposit Account Deposit Account Number: 15-0633 Deposit Account Name: McCarthy Tétrault LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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## FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |              | SEARCH FEES |              | EXAMINATION FEES |              | Fees Paid (\$) |
|------------------|-------------|--------------|-------------|--------------|------------------|--------------|----------------|
|                  | Fee (\$)    | Small Entity | Fee (\$)    | Small Entity | Fee (\$)         | Small Entity |                |
| Utility          | 300         | 150          | 500         | 250          | 200              | 100          |                |
| Design           | 200         | 100          | 100         | 50           | 130              | 65           |                |
| Plant            | 200         | 100          | 300         | 150          | 160              | 80           |                |
| Reissue          | 300         | 150          | 500         | 250          | 600              | 300          |                |
| Provisional      | 200         | 100          | 0           | 0            | 0                | 0            |                |

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

## Small Entity

Fee (\$)

Fee (\$)

Each independent claim over 3 (including Reissues)

Fee (\$)

Fee (\$)

Multiple dependent claims

Multiple Dependent Claims

Total Claims (MP = 21) Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

Fee (\$)

Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims (MP = 5) Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

## 4. OTHER FEE(S)

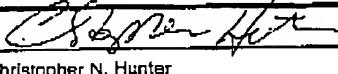
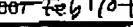
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Submission of an Information Disclosure Statement

Fee Paid (\$)

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## SUBMITTED BY

|                   |   |   |   |
|-------------------|---|---|---|
| Signature         |  | Registration No.<br>(Attorney/Agent) 52,528 | Telephone 416-501-7875  |
| Name (Print/Type) | Christopher N. Hunter   |   | Date January 30, 2007  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEB 01 2007

Appl. No. : 10/722,474  
Applicant : JOCH, Anthony  
Filed : November 28, 2003  
Title : LOW-COMPLEXITY MOTION VECTOR PREDICTION FOR VIDEO CODEC WITH TWO LISTS OF REFERENCE PICTURES  
Art Unit : 2621  
  
Docket No. : 178827-336070 (T1176-8-US)  
Customer No. : 27155

Date: January 30, 2007

Commissioner for Patents  
United States Patent and Trademark Office  
Customer Window, Mail Stop AMENDMENT  
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Alexandria, Virginia 22314  
U.S.A.

**INFORMATION DISCLOSURE STATEMENT**

Dear Sirs:

In accordance with 37 C.F.R. § 1.56, the Applicant encloses a completed Information Disclosure Statement.

Pursuant to 37 C.F.R. § 1.97(c) and § 1.17(p), please charge the prescribed fee of \$180.00 to deposit account No. 15-0633 of McCarthy Tétrault LLP. The Patent Office is authorized to charge any fee deficiency or credit any overpayment to deposit account No. 15-0633 of McCarthy Tétrault LLP.

According to the terms of 37 C.F.R. § 1.97(g) and (h), this Information Disclosure Statement shall not be construed as a representation that a search has been made, an admission that the information cited is or is considered to be material to patentability, or that no other material information exists.

Nine (9) United States patent documents are cited on the enclosed one (1) sheet of Form PTO/SB/08.

02/02/2007 TL0111 00000047 150633 10722474

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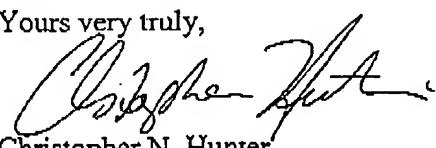
TDO-RED #8354143 v. 1

PAGE 3/5 \* RCVD AT 2/1/2007 8:08:06 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/9 \* DNI:2738300 \* CSID:4168680673 \* DURATION (mm:ss):02:12

Prompt consideration of this Information Disclosure Statement and the identified references by the Examiner is respectfully requested.

Should any Patent Office official want to telephone, the call should be made to Christopher N. Hunter (Reg. No. 52,528) at (416) 601-7875.

Yours very truly,



Christopher N. Hunter  
Registration No. 52,528

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CNH/jdh  
Encl.

TDO-RED #8354143 v. 1

PAGE 4/5 \* RCVD AT 2/1/2007 8:08:06 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/9 \* DNIS:2738300 \* CSID:4168680673 \* DURATION (mm:ss):02:12

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| Substitute for form PTO/SB/08   |   | Complete if Known   | RECEIVED<br>CENTRAL FAX CENTER                       |
| <b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br>(use as many sheets as necessary) |   | Application Number<br>10/722,474<br>Filing Date<br>November 28, 2003<br>First named Inventor<br>JOCH, Anthony<br>Group Art Unit<br>2621<br>Examiner Name<br>n/a | FEB 01 2007  |
| Sheet   | 1 | of 1  | Attorney Docket Number<br>178827-336070 (T1176-8-US) |

|                       |  |                    |  |
|-----------------------|--|--------------------|--|
| Examiner<br>Signature |  | Date<br>Considered |  |
|-----------------------|--|--------------------|--|

**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Unique citation designation number. <sup>2</sup>See attached Kinds of U.S. Patent Documents. <sup>3</sup>Enter Office that issued the document by the two-letter code (WIPO Standard ST 2). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document.

**Standard ST.3).** "For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document." **5**Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. **6**Applicant is to place a check mark here if English language translation is attached